

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**TIM SCOTT FOR SENATE**

Full Name (Last, First, Middle Initial)

**WINRED****A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2022

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

18978017.14

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		28		2021

**Transaction ID : A7633CBED95A7489A97A**

Amount of Each Receipt this Period

2.00

☒ Memo Item  
 INTERMEDIARY
TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

**GALASSO, MARY, V., ,**

Mailing Address 21070 WOODLAND GLEN DR

City

NORTHVILLE

State

MI

Zip Code

48167-2443

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2022

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

389.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		23		2021

**Transaction ID : A2EBDC19031FE46B6A5E**

Amount of Each Receipt this Period

3.00

☐ Memo Item  
 EARMARKED (NON-DIRECTED) THROUGH WINRED
**C.**

Full Name (Last, First, Middle Initial)

**WINRED**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2022

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

18978017.14

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		28		2021

**Transaction ID : A8DD7D074C7F74D3C8E6**

Amount of Each Receipt this Period

3.00

☒ Memo Item  
 INTERMEDIARY
TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

3.00